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THE IMPORTANCE OF ADOPTING THE WASSERMAN TEST FOR SYPHILIS AS A ROUTINE MEASURE IN THE EXAM- INATION OF THE INMATES OF PENAL INSTITUTIONS.¹

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Realizing from clinical symptoms that a large number of the inmates of the Massachusetts Reformatory for Women were infected with syphilis, it was thought advisable before instituting modern treatment to examine the blood of every individual in order to ascertain the prevalence of the disease among those showing no symptoms.

During the last three months, the Wasserman test has been done on 239 women, the blood being tested at the Neuropathological Laboratory of the Harvard Medical School.

Of the 239 cases examined, 100 or 41.8% were found to be positive, 57 cases being frankly positive and 43 moderately or slightly positive; 4 were suggestive only. Among those giving a suggestive or negative reaction, there were seven which had a positive history but which had been under treatment. By adding these to the number giving a positive reaction we have a total of 107 positive cases, 44.7% of the 239.

Of great importance is the fact that but 48.5% of the 107 positive cases gave any history or presented any clinical manifestations of the disease. Only 32.7% of the positive cases were known to have received treatment of any kind.

Dividing the women into groups, according to their offenses we have the following results. Of those cases sentenced for prostitution under the charge of "Common Night Walker," 63.3% gave a positive reaction. Classifying with these all individuals whose offenses had a probable sex basis such as "Idle and Disorderly," "Lewd and Lascivious," "Adultery" and "Stubborn Child" making a total of 139 cases, 75 cases or 53.9% were found to be positive. Forty-six per cent of the cases of drunkenness were also positive. Of the remaining cases which include larceny, forgery, abandoning children, murder, a total of 57 cases, only 12 cases or 21% were positive.

The widespread use of the Wasserman test for syphilis has taught us much regarding the disease and its prevalence. In order to gain

¹Read at the Annual Meeting of the American Prison Association, Indianapolis, Indiana, October 11-16, 1913.

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more knowledge of the disease as a factor in social conditions, we believe that the laboratory test should be adopted in penal institutions as a routine measure in the same way that it has been adopted in hospitals.

The following are three reasons for this:

I. As a protection to other inmates and officers in the institution.

Many cases show no clinical evidence of the disease on entrance, and give no history of an infection. Especially is it true of women that they may have been wholly unaware of the presence of the disease. In connection with this it will be remembered that but 48.5% of our positive cases gave any history.

While in the institution, however, the disease may become active. Even then the only manifestation may be lesions in the mouth which are exceedingly small and may be considered by the patient of insufficient importance to be reported to the physician. Such lesions, however, are a source of great danger to others who come in contact with them. If it is known which individuals are infected, they can be isolated and kept under treatment while in the institution. Under such conditions the danger of infection to officers and other inmates may be reduced to a minimum.

II. As a help in building up a physical condition of each individual.

The modern aim in penal institutions is to improve as much as possible the physical condition of each individual, so that on his release he may be the better fitted to cope with the situations in which society places him. Syphilis is a disease which may greatly undermine the general physical condition without showing definite clinical symptoms. It is for such cases and also for those in which a definite diagnosis is impossible from clinical symptoms that the importance of the laboratory test is urged. If the test should be positive treatment may be instituted while the patient is under the state's care, and his general condition may be much improved before he returns to the community.

III. As a protection to the community.

Women are constantly going out from the state's care to return to the community infected with this terrible disease which may be spread broadcast. We have few statistics which show by laboratory methods the prevalence of the disease in penal institutions particularly among the prostitute class. Of 446 cases tested at the State Reformatory for Women at Bedford Hills, New York, 37.7% gave positive reaction with the Wasserman test. With a modification in technique in which four hours in the ice-box was substituted for the usual one hour in the in-

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The Results of the Wassermann Reaction for Syphilis in 239 cases, at the Reformatory for Women, South Framingham, Mass.

OFFENCE	WASSERMANN REACTION					Positive cases giving negative on account of Wassermann treatment	Total No. positive cases.	% of positive cases,	
	Positive.	Moderately Positive.	Suspicious.	Negative.	Total.				
Drunkenness	11	9	1	22	43		20	46.5%	
Common night walker.	9	10	0	11	30		19	63.3%	
All other offences with probable sex basis such as idle and disorderly, lewd and lascivious, adultery, stubborn child, etc.	31	21	3	52	109	4	56	51.4%	} 53.9 %
Remaining cases with no sex basis apparent, including larceny, forgery assault, murder, etc.	6	3	0	48	57	3	12	21%	
Total	57	43	4	135	239	7	107	44.7%	

Of the 107 positive cases, only 48.5% gave any history of the disease or presented any clinical manifestations.
Only 32.7% of the 107 cases were known to have received treatment of any kind.

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cubator to fix complement, positive results were obtained in 48% of the cases.³

Recognizing the fact that medical control of prostitution is inefficient at best, and at worst is a terrible menace to the health of the community, at least we can protect the community to a considerable extent by effectively treating the women who come under state control.

The first step is to discover how prevalent the disease is in different communities by applying the test as a routine measure to every individual entering a penal institution. Having determined this very important fact the state should see that each individual infected receives adequate treatment while in the institution. According to our findings only 32.7% of the positive cases had received any treatment whatever. In only a few cases had the treatment included the administration of Salvarsan, and in the majority of cases had received the ordinary treatment for a few months only.

In the state of Massachusetts there exists the following law: (R. L. Chap. 75, Sec. 48.)

"An inmate of a public charitable institution or a prisoner in a penal institution who is affected with syphilis shall be forthwith placed under medical treatment, and, if in the opinion of the attending physician, it is necessary, he shall be isolated until danger of contagion has passed or the physician determines that his isolation is unnecessary. If, at the expiration of his sentence, he is afflicted with syphilis in its contagious or infectious symptoms, or if in the opinion of the attending physician of the institution or of such physician as the authorities thereof may consult, his discharge would be dangerous to public health, he shall be placed under medical treatment and cared for as above provided in the institution where he has been confined until, in the opinion of the attending physician, such symptoms have disappeared and his discharge will not endanger the public health," etc.

It may be many years before syphilis is adequately controlled in the community or treated like other contagious diseases. However, while we have statistics showing over 50% of prostitutes in institutions to be infected with the disease, the importance of the further study and treatment of such cases is apparent.

Such a law as the one referred to if enforced throughout the country, with the aid of the laboratory test for diagnosis and modern methods in treatment, should influence to an appreciable extent the spread of this much dreaded disease.

³Commercialized Prostitution in New York City, p. 189. Kneeland, The Century Co., 1913.